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7 WASTE DISPOSAL

DFS operations generate a substantial quantity of waste. Much of this waste is non-hazardous material such as paper, food scraps, and soft drink containers, which does not fall under the requirements of this manual. However, laboratory and building equipment operations generate a considerable amount of waste which is covered by Federal, State and local regulations.

7.1 General Practices

- 7.1.1 All regulated wastes are managed in compliance with applicable Federal, State and local regulations.
- 7.1.2 Chemical and biological wastes are removed from DFS buildings, and subsequently transported, stored, and disposed of by licensed contractors.
- 7.1.3 Waste containers are constructed of appropriate materials, appropriately labeled, and not overfilled.

7.2 Hazardous (Chemical) Waste

Hazardous waste disposal is Federally regulated under the Resource Conservation and Recovery Act (RCRA). The Act is enforced by the Environmental Protection Agency's Office of Solid Waste (OSW), which enforces RCRA compliance by entities which generate, store, transport and dispose of hazardous waste. In Virginia, hazardous waste is regulated under both RCRA and the Virginia Waste Management Act, which is enforced by the Department of Environmental Quality.

7.2.1 Waste Identification

Before hazardous waste can be properly managed, it must be identified. To this end, all employees are responsible for knowing which wastes they generate contain hazardous chemicals, and handling them appropriately. Note that in Virginia, wastes which contain both hazardous chemicals and bloodborne pathogens are disposed of as chemical waste, therefore must be handled and managed as such.

7.2.2 Containers

Hazardous waste containers, and labels, as necessary, must be made of materials which are non-reactive with their contents. Containers must be clearly labeled with the composition of their contents – either all contained chemicals and approximate percentages of each, or a generic name. If a generic name is used, the detailed composition must be made available to the Safety Coordinator or Safety Officer before the containers can be disposed of. Containers, particularly of volatile chemicals, must be kept closed at all times other than when waste is being added (or removed). Labels should identify the hazards of the waste, e.g., flammability or toxicity, when appropriate.

7.2.3 Mixing of Wastes

Different wastes may be collected in the same container if they are compatible, i.e., non-reactive, miscible, etc.

7.2.4 Storage and Transport

- 7.2.4.1 Partially filled waste containers shall be stored in a designated, marked area(s) in each Section or building area. When a container is full, the Safety Coordinator or Safety Officer shall be informed and will transport the container to the designated area in the building's chemical storeroom. Only the Coordinator/Officer may place waste in the storeroom area.
- 7.2.4.2 Waste containers shall be stored following commonly accepted guidelines with respect to the type(s) of hazard and incompatibility of materials.
- 7.2.4.3 Waste shall be transported within the building following the same requirements as for hazardous chemicals.

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7.2.4.4 An inventory of the waste (type and amount) in the storeroom area must be maintained.

7.2.5 Disposal

Hazardous waste may not be stored for more than six months in the storeroom area. A hazardous waste contractor will be retained twice a year to remove the accumulated waste from each building to satisfy this requirement.

7.3 Medical (Biological) Waste

Regulated medical waste disposal is regulated by the Virginia Waste Management Act, which is enforced by the Department of Environmental Quality. DFS policies for management of biohazards are defined in the Exposure Control Plan (Appendix B). Further details of disposal practices are provided below.

7.3.1 Containers

Large medical waste containers are constructed of cardboard and lined with thick plastic bags, both labeled in compliance with the Exposure Control Plan. Small closable hard plastic or cardboard containers, also appropriately labeled, are provided for use with contaminated sharps.

7.3.2 Transport and Storage

- 7.3.2.1 Full small containers shall be closed and placed in the large containers.
- 7.3.2.2 When large containers are full, they shall be sealed and prepared for transport by:
 - twisting, doubling over, and taping the top of the bag,
 - taping the top of the box, and
 - placing the disposal contractor's label on the appropriate area of the box and affixing the date of sealing on the label.
- 7.3.2.3 Sealed containers shall be placed in the building biohazard storage area within a day of sealing. That area should be marked with an appropriate sign.
- 7.3.2.4 Containers shall be transported within the building by cart and on the freight elevator, if necessary.

7.3.3 Disposal

Medical waste may not be stored for more than seven days in the accumulation area. A medical waste contractor will be retained to remove the accumulated waste from the building to satisfy this requirement.

7.4 Sharps

Broken glass and similar materials, although not defined as a hazard by any applicable regulation or standard other than the OSHA Bloodborne Pathogens Standard, are sufficiently dangerous to be addressed in this Manual. Also, broken laboratory glassware is often contaminated with hazardous chemicals, and must be managed with those chemicals. In general, "clean" broken glass, ceramics, etc., jagged metals, and other sharps which are being disposed of must be placed in appropriately labeled cardboard sharps containers. Such materials should be handled/collected with due care, using brushes and dustpans rather than bare hands.

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